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## \*BIBDATASHEET\*

CONFIRMATION NO. 1228

Bib Data Sheet

SERIAL NUMBER 09/923,835	FILING DATE 08/06/2001  RULE	CLASS 345	GROUP ART UNIT 2173	ATTORNEY DOCKET NO. 004860.P2640
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## APPLICANTS

Xiaochun Nie, Cupertino, CA;

Christopher L. Flick, Sunnyvale, CA;

\*\* CONTINUING DATA \*\*\*\*\*

NONE

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\*\* FOREIGN APPLICATIONS \*\*\*\*\*

NONE

TH

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 09/11/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: _____	CA	19	63	6

## ADDRESS

BLAKELY, SOKOLOFF, TAYLOR &amp; ZAFMAN LLP

Seventh Floor

12400 Wilshire Boulevard

Los Angeles, CA

90025-1026

## TITLE

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